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PTO/SB/05 (08-00) (modified)

Approved for use through 9/30/2001, OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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| NEW UTILITY PATENT APPLICATION TRANSMITTAL <i>(only for new nonprovisional applications under 37 CFR 1.53(b))</i> | Attorney Docket Number | 22300-05810 |
| | First Named Inventor | Kornelius A. Vissers |
| | Title | Combining Operations in a VLIW Processor |
| | Express Mail Label No. | EL497213126US |

| APPLICATION ELEMENTS | ACCOMPANYING APPLICATION PARTS |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) | 7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) |
| 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | 8. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) |
| 3. <input checked="" type="checkbox"/> Specification Total Pages <input type="text" value="24"/> <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"><input checked="" type="checkbox"/> Descriptive Title of the Invention<input checked="" type="checkbox"/> Cross Reference(s) to Related Case(s)<input checked="" type="checkbox"/> Statement Regarding Fed sponsored R & D<input checked="" type="checkbox"/> Background of the Invention<input checked="" type="checkbox"/> Brief Summary of the Invention<input checked="" type="checkbox"/> Brief Description of the Drawing(s)<input checked="" type="checkbox"/> Detailed Description<input checked="" type="checkbox"/> Claim or Claims<input checked="" type="checkbox"/> Abstract of the Disclosure | 9. <input checked="" type="checkbox"/> Power of Attorney or Authorization of Agent |
| 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets <input type="text" value="5"/> | 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement |
| 5. Oath or Declaration | 11. <input type="checkbox"/> Preliminary Amendment |
| a. <input checked="" type="checkbox"/> New Declaration Total Pages <input type="text" value="1"/> <input type="checkbox"/> Executed (original or copy) | 12. <input type="checkbox"/> Information Disclosure Statement & PTO-1449 <input type="checkbox"/> Copies of IDS Citation(s) |
| b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> | 13. <input checked="" type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent |
| i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). | 14. <input checked="" type="checkbox"/> Return Postcard |
| 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | 15. <input type="checkbox"/> |
| | 16. <input type="checkbox"/> |
| | 17. <input type="checkbox"/> |
| ADDRESS TO: Box Patent Application Commissioner for Patents Washington, D.C. 20231 | |

18. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information below and in a preliminary amendment or in an Application Data Sheet under 37 CFR 1.76:

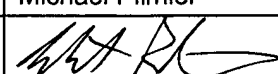
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: ____/____

Prior application information: Examiner: _____ Group/Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuing or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

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| <input checked="" type="checkbox"/> Customer Number and Bar Code Label |  00758 |
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|-------------------|-------------------------------------------------------------------------------------|-----------------------------------|---------------|
| Name (Print/Type) | Michael Plimier | Registration No. (Attorney/Agent) | 43,004 |
| Signature |  | Date | June 29, 2001 |

22300/05810/DOCS/1186398.1

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| 0002/PTO(modified) Rev. 10/2000 <div style="text-align: center;">FEE TRANSMITTAL</div> <div style="text-align: center;">TOTAL AMOUNT OF PAYMENT</div> Subtotal (1) + Subtotal (2) + Subtotal (3) = (\$ 1,364.00) | <div style="text-align: center;">U.S. Department of Commerce Patent and Trademark Office</div> <div style="text-align: center;">Complete if Known</div> <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>Application Number</td><td>Not yet known</td></tr> <tr><td>Filing Date</td><td>June 29, 2001</td></tr> <tr><td>First Named Inventor</td><td>Kornelius A. Vissers</td></tr> <tr><td>Group Art Unit</td><td>Not yet known</td></tr> <tr><td>Examiner Name</td><td>Not yet known</td></tr> <tr><td>Attorney Docket Number</td><td>22300-05810</td></tr> </table> | Application Number | Not yet known | Filing Date | June 29, 2001 | First Named Inventor | Kornelius A. Vissers | Group Art Unit | Not yet known | Examiner Name | Not yet known | Attorney Docket Number | 22300-05810 |
| Application Number | Not yet known | | | | | | | | | | | | |
| Filing Date | June 29, 2001 | | | | | | | | | | | | |
| First Named Inventor | Kornelius A. Vissers | | | | | | | | | | | | |
| Group Art Unit | Not yet known | | | | | | | | | | | | |
| Examiner Name | Not yet known | | | | | | | | | | | | |
| Attorney Docket Number | 22300-05810 | | | | | | | | | | | | |

| METHOD OF PAYMENT | FEE CALCULATION (continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. The Commissioner is hereby authorized to: <input type="checkbox"/> Charge the indicated fees to the below mentioned deposit account. <input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account. [†] <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27 Deposit Account Number: 19-2555 Deposit Account Name: FENWICK & WEST LLP A Duplicate Copy of this authorization is attached 2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other | 3. ADDITIONAL FEES <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity Fee Code/Fee</th> <th style="text-align: left;">Small Entity Fee Code/Fee</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: left;">Fee Due</th> </tr> </thead> <tbody> <tr><td>105/\$130</td><td>205/\$65</td><td>Surcharge - late filing fee or oath</td><td><input type="text"/></td></tr> <tr><td>127/\$50</td><td>227/\$25</td><td>Surcharge-late provisional filing fee or cover sheet</td><td><input type="text"/></td></tr> <tr><td>147/\$2,520</td><td>147/\$2,520</td><td>For filing a request for reexamination</td><td><input type="text"/></td></tr> <tr><td>115/\$110</td><td>215/\$55</td><td>Extension for response within first month[†]</td><td><input type="text"/></td></tr> <tr><td>116/\$390</td><td>216/\$195</td><td>Extension for response within second month[†]</td><td><input type="text"/></td></tr> <tr><td>117/\$890</td><td>217/\$445</td><td>Extension for response within third month[†]</td><td><input type="text"/></td></tr> <tr><td>118/\$1,390</td><td>218/\$695</td><td>Extension for response within fourth month[†]</td><td><input type="text"/></td></tr> <tr><td>128/\$1,890</td><td>228/\$945</td><td>Extension for response within fifth month[†]</td><td><input type="text"/></td></tr> <tr><td>119/\$310</td><td>219/\$155</td><td>Notice of Appeal</td><td><input type="text"/></td></tr> <tr><td>141/\$1,240</td><td>241/\$620</td><td>Petition to revive unintentionally abandoned application</td><td><input type="text"/></td></tr> <tr><td>142/\$1,240</td><td>242/\$620</td><td>Utility Issue Fee (Or Reissue)</td><td><input type="text"/></td></tr> <tr><td>143/\$440</td><td>243/\$220</td><td>Design Issue Fee</td><td><input type="text"/></td></tr> <tr><td>122/\$130</td><td>122/\$130</td><td>Petitions to the Commissioner</td><td><input type="text"/></td></tr> <tr><td>126/\$180</td><td>126/\$180</td><td>Submission of Information Disclosure Statement</td><td><input type="text"/></td></tr> <tr><td>179/\$710</td><td>279/\$355</td><td>Request for Continued Examination (RCE)</td><td><input type="text"/></td></tr> <tr><td>581/\$40</td><td>581/\$40</td><td>Recording each patent assignment per property (times number of properties)</td><td><input type="text"/></td></tr> <tr><td>146/\$710</td><td>246/\$355</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td><input type="text"/></td></tr> <tr><td>149/\$710</td><td>249/\$355</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td><input type="text"/></td></tr> <tr><td colspan="3">Other fee (specify):</td><td><input type="text"/></td></tr> <tr><td colspan="3">Other fee (specify):</td><td><input type="text"/></td></tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (3)</td> <td>(\$ 0.00)</td> </tr> </tbody> </table> | Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description | Fee Due | 105/\$130 | 205/\$65 | Surcharge - late filing fee or oath | <input type="text"/> | 127/\$50 | 227/\$25 | Surcharge-late provisional filing fee or cover sheet | <input type="text"/> | 147/\$2,520 | 147/\$2,520 | For filing a request for reexamination | <input type="text"/> | 115/\$110 | 215/\$55 | Extension for response within first month [†] | <input type="text"/> | 116/\$390 | 216/\$195 | Extension for response within second month [†] | <input type="text"/> | 117/\$890 | 217/\$445 | Extension for response within third month [†] | <input type="text"/> | 118/\$1,390 | 218/\$695 | Extension for response within fourth month [†] | <input type="text"/> | 128/\$1,890 | 228/\$945 | Extension for response within fifth month [†] | <input type="text"/> | 119/\$310 | 219/\$155 | Notice of Appeal | <input type="text"/> | 141/\$1,240 | 241/\$620 | Petition to revive unintentionally abandoned application | <input type="text"/> | 142/\$1,240 | 242/\$620 | Utility Issue Fee (Or Reissue) | <input type="text"/> | 143/\$440 | 243/\$220 | Design Issue Fee | <input type="text"/> | 122/\$130 | 122/\$130 | Petitions to the Commissioner | <input type="text"/> | 126/\$180 | 126/\$180 | Submission of Information Disclosure Statement | <input type="text"/> | 179/\$710 | 279/\$355 | Request for Continued Examination (RCE) | <input type="text"/> | 581/\$40 | 581/\$40 | Recording each patent assignment per property (times number of properties) | <input type="text"/> | 146/\$710 | 246/\$355 | Filing a submission after final rejection (37 CFR 1.129(a)) | <input type="text"/> | 149/\$710 | 249/\$355 | For each additional invention to be examined (37 CFR 1.129(b)) | <input type="text"/> | Other fee (specify): | | | <input type="text"/> | Other fee (specify): | | | <input type="text"/> | SUBTOTAL (3) | | | (\$ 0.00) |
| Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description | Fee Due | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 105/\$130 | 205/\$65 | Surcharge - late filing fee or oath | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 127/\$50 | 227/\$25 | Surcharge-late provisional filing fee or cover sheet | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 147/\$2,520 | 147/\$2,520 | For filing a request for reexamination | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 115/\$110 | 215/\$55 | Extension for response within first month [†] | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 116/\$390 | 216/\$195 | Extension for response within second month [†] | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 117/\$890 | 217/\$445 | Extension for response within third month [†] | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 118/\$1,390 | 218/\$695 | Extension for response within fourth month [†] | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 128/\$1,890 | 228/\$945 | Extension for response within fifth month [†] | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 119/\$310 | 219/\$155 | Notice of Appeal | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 141/\$1,240 | 241/\$620 | Petition to revive unintentionally abandoned application | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 142/\$1,240 | 242/\$620 | Utility Issue Fee (Or Reissue) | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 143/\$440 | 243/\$220 | Design Issue Fee | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 122/\$130 | 122/\$130 | Petitions to the Commissioner | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 126/\$180 | 126/\$180 | Submission of Information Disclosure Statement | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 179/\$710 | 279/\$355 | Request for Continued Examination (RCE) | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 581/\$40 | 581/\$40 | Recording each patent assignment per property (times number of properties) | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 146/\$710 | 246/\$355 | Filing a submission after final rejection (37 CFR 1.129(a)) | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 149/\$710 | 249/\$355 | For each additional invention to be examined (37 CFR 1.129(b)) | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other fee (specify): | | | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| SUBTOTAL (3) | | | (\$ 0.00) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. FILING FEE <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity Fee Code/Fee</th> <th style="text-align: left;">Small Entity Fee Code/Fee</th> <th style="text-align: left;">Description</th> <th style="text-align: left;">Fee Due</th> </tr> </thead> <tbody> <tr><td>101/\$710</td><td>201/\$355</td><td>Utility Filing</td><td>710</td></tr> <tr><td>106/\$320</td><td>206/\$160</td><td>Design Filing</td><td><input type="text"/></td></tr> <tr><td>108/\$710</td><td>208/\$355</td><td>Reissue</td><td><input type="text"/></td></tr> <tr><td>114/\$150</td><td>214/\$75</td><td>Provisional Filing</td><td><input type="text"/></td></tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (1)</td> <td>(\$ 710.00)</td> </tr> </tbody> </table> | Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Description | Fee Due | 101/\$710 | 201/\$355 | Utility Filing | 710 | 106/\$320 | 206/\$160 | Design Filing | <input type="text"/> | 108/\$710 | 208/\$355 | Reissue | <input type="text"/> | 114/\$150 | 214/\$75 | Provisional Filing | <input type="text"/> | SUBTOTAL (1) | | | (\$ 710.00) | 2. CLAIMS <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity Fee Code/Fee</th> <th style="text-align: left;">Small Entity Fee Code/Fee</th> <th style="text-align: left;">Fee Description</th> </tr> </thead> <tbody> <tr><td>103/\$18</td><td>203/\$9</td><td>Claims in excess of 20</td></tr> <tr><td>102/\$80</td><td>202/\$40</td><td>Independent claims in excess of 3</td></tr> <tr><td>104/\$270</td><td>204/\$135</td><td>Multiple dependent claim</td></tr> <tr><td>109/\$80</td><td>209/\$40</td><td>Reissue independent claims over original patent</td></tr> <tr><td>110/\$18</td><td>210/\$9</td><td>Reissue claims in excess of 20 and over original patent</td></tr> </tbody> </table> | Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description | 103/\$18 | 203/\$9 | Claims in excess of 20 | 102/\$80 | 202/\$40 | Independent claims in excess of 3 | 104/\$270 | 204/\$135 | Multiple dependent claim | 109/\$80 | 209/\$40 | Reissue independent claims over original patent | 110/\$18 | 210/\$9 | Reissue claims in excess of 20 and over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Description | Fee Due | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 101/\$710 | 201/\$355 | Utility Filing | 710 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 106/\$320 | 206/\$160 | Design Filing | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 108/\$710 | 208/\$355 | Reissue | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 114/\$150 | 214/\$75 | Provisional Filing | <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (1) | | | (\$ 710.00) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 103/\$18 | 203/\$9 | Claims in excess of 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 102/\$80 | 202/\$40 | Independent claims in excess of 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 104/\$270 | 204/\$135 | Multiple dependent claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 109/\$80 | 209/\$40 | Reissue independent claims over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 110/\$18 | 210/\$9 | Reissue claims in excess of 20 and over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">(Col. 1)</th> <th colspan="2">(Col. 2)</th> <th colspan="2">(Col. 3)</th> <th colspan="2"></th> <th colspan="2"></th> </tr> <tr> <th>For</th> <th>No. of Existing Claims</th> <th></th> <th>Highest No. Previously Paid For</th> <th></th> <th>Extra**</th> <th></th> <th>Fee</th> <th></th> <th>Fee Due</th> </tr> </thead> <tbody> <tr> <td>TOTAL</td> <td>43</td> <td>minus*</td> <td>20 or 0</td> <td>=</td> <td>23</td> <td>x</td> <td>18</td> <td>=</td> <td>414</td> </tr> <tr> <td>INDEP</td> <td>6</td> <td>minus*</td> <td>3 or 0</td> <td>=</td> <td>3</td> <td>x</td> <td>80</td> <td>=</td> <td>240</td> </tr> <tr> <td colspan="10">[] First presentation of multiple dependent claim</td> </tr> <tr> <td colspan="8" style="text-align: right;">SUBTOTAL (2)</td> <td>(\$ 654)</td> </tr> </tbody> </table> <p>* Subtract the greater number of Col. 2 ** If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3</p> | | (Col. 1) | | (Col. 2) | | (Col. 3) | | | | | | For | No. of Existing Claims | | Highest No. Previously Paid For | | Extra** | | Fee | | Fee Due | TOTAL | 43 | minus* | 20 or 0 | = | 23 | x | 18 | = | 414 | INDEP | 6 | minus* | 3 or 0 | = | 3 | x | 80 | = | 240 | [] First presentation of multiple dependent claim | | | | | | | | | | SUBTOTAL (2) | | | | | | | | (\$ 654) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (Col. 1) | | (Col. 2) | | (Col. 3) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For | No. of Existing Claims | | Highest No. Previously Paid For | | Extra** | | Fee | | Fee Due | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL | 43 | minus* | 20 or 0 | = | 23 | x | 18 | = | 414 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| INDEP | 6 | minus* | 3 or 0 | = | 3 | x | 80 | = | 240 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [] First presentation of multiple dependent claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (2) | | | | | | | | (\$ 654) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | |
|-----------------------|-----------------|---------------------------------|---------------|
| SUBMITTED BY | | Complete (if applicable) | |
| Typed or Printed Name | Michael Plimier | Reg. Number | 43,004 |
| Signature | | Date | June 29, 2001 |

22300/05810/DOCS/1186413.1